Neighborhood Health Plan of Rhode Island
Formulary Change Document

September 2026 Updates

The following changes to the Neighborhood Medicaid Formulary were recently approved by the Pharmacy and Therapeutics (P&T) Committee or a recent generic became available for a formulary medication. All changes to the formulary are effective immediately unless otherwise noted.

Drug Name	**Benefit**	**Description of Coding Change**
WAINUA INJ 45/0.8ML	Pharmacy Benefit	Adding product to formulary
HARLIKU TAB 2MG	Pharmacy Benefit	Adding product to formulary
LIFYORLI CAP 125MG DS	Pharmacy Benefit	Adding product to formulary
LIFYORLI CAP 150MG DS	Pharmacy Benefit	Adding product to formulary
ORLADEYO PAK 72MG	Pharmacy Benefit	Adding product to formulary
ORLADEYO PAK 96MG	Pharmacy Benefit	Adding product to formulary
ORLADEYO PAK 108MG	Pharmacy Benefit	Adding product to formulary
ORLADEYO PAK 132MG	Pharmacy Benefit	Adding product to formulary
TYVASO DPI POW 48-80MCG	Pharmacy Benefit	Adding product to formulary

Please call the Pharmacy Help Desk at 1-401-459-6020 for pharmacy authorization requests or for further information on the Neighborhood Medicaid formulary.